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APPLICANTS

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Yes *WL*
**** CONTINUING DATA *******
 This appln claims benefit of 60/245,334 11/01/2000 *
 (*)Data provided by applicant is not consistent with PTO records.

None *WL*
**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>None</i> <i>WL</i> Examiner's Signature Initials	STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 4
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TITLE
 System chip synthesis

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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